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<b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		<b>Complete if Known</b>	
		Application Number	10/726,625-Conf. #5742
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	December 4, 2003
TOTAL AMOUNT OF PAYMENT (\$)		First Named Inventor	Harry A. Dugger, III
		Examiner Name	M. Haghighatian
(\$)		Art Unit	1616
690.00		Attorney Docket No.	N9810.0033/P033

**METHOD OF PAYMENT** (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☐ Deposit Account Deposit Account Number: 04-1073 Deposit Account Name: Dickstein Shapiro Morin & Oshinsky LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☐ Charge any additional fee(s) or any underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

**Total Claims** 30 - 30 = 0 **Extra Claims** 0 **Fee (\$)** 0 **Fee Paid (\$)** 0

**Indep. Claims** 3 - 3 = 0 **Extra Claims** 0 **Fee (\$)** 0 **Fee Paid (\$)** 0

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
<u>30</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>

**4. OTHER FEE(S)**

	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	
Other: 2253 Extension for response within third month	510.00
1806 Submission of an Information Disclosure Statement	180.00

<b>SUBMITTED BY</b>			
Signature		Registration No. (Attorney/Agent)	32,115
Name (Print/Type)	James W. Brady, Jr.	Telephone	(202) 775-4786
		Date	1/13/05



Docket No.: N9810.0033/P033  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

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In re Patent Application of:  
Harry A. Dugger, III

Application No.: 10/726,625

Confirmation No.: 5742

Filed: December 4, 2003

Art Unit: 1616

For: BUCCAL, POLAR AND NON-POLAR  
SPRAY OR CAPSULE CONTAINING  
DRUGS FOR TREATING PAIN

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Examiner: M. Haghighatian

**AMENDMENT IN RESPONSE TO NON-FINAL OFFICE ACTION**

MS Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

**INTRODUCTORY COMMENTS**

In response to the Office Action dated July 14, 2004, please amend the above-identified U.S. patent application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 7 of this paper.